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“EFFICACY OF CONSTITUTIONAL REMEDIES IN MANAGMENT OF DIABETES MELLITUS TYPE 2”

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INTRODUCTION: -

“Diabetes mellitus is a clinical syndrome characterized by hyperglycemia due to deficiency or diminished effectiveness of insulin “Efficacy of Constitutional Remedies in Management of DMT2

KEYWORDS

Homoeopathy, Diabetes mellitus, constitution, insulin, diabetes type 2.

CONSTITUTION: -

According to Stuart close: - “Constitution is that aggregate of hereditary characters, influenced more or less by environment, which determines the individual’s reaction, successful or unsuccessful, to the stress of environment”

Type of constitutional: -

1. Scrofulous constitution
2. Hydrogenoid constitution
3. Leucophlegmatic constitution

NEED OF STUDY

Diabetes mellitus is a syndrome – ubiquitous and dynamic. WHO predicts that India will have largest number of diabetics, around 80.9 million, by 2030. Research finding in conventional medicine put toward the limitations & side effects of hypoglycemic agents, insulin therapy, zinc, overdose also side effects of sweeteners.

In view of the alarming rise of diabetes, the holistic therapy of homoeopathy is very beneficial for the sake of ailing humanity. Homoeopathic literature is full of information regarding the management of Diabetes. The number of medicines as well as clinical experiences regarding Diabetes Mellitus are increasing day by day hence to accommodate all these growing information a well selected repertory is needed. There are so many repertories available in the field of Homoeopathy and now a days the practitioners are using them in finding out the similimum according to the symptoms presented by the diabetic patients. Still a need is felt among practitioners to find out the more useful repertory in cases of diabetes mellitus to deal with patient's complaints. Among the various repertories, Homeopathic Medical Repertory by Robin Murphy, contains information from all the existing repertories & correction from various sources.

Thus, this repertory must contain all the rubrics related to symptomatic complaints appear in a patient suffering with diabetes mellitus. This work is not intended to be one more addition to the rich and varied homoeopathic literature, but to reiterate the value and importance of Homeopathic Medical Repertory.

AIMS:

- Evaluate the effectiveness of constitutional remedies for treatment of DMT2

OBJECTIVE:

- To understand the role of constitutional remedies in treatment of DM Type 2
- To understand the which potency is more effective in treatment of DM Type 2.
- To prevent the complication and recurrence and provide the cure in rapid and gentle way.

REVIEW OF LITERATURE:

Diabetes Mellitus is probably one of the oldest diseases known to man. It was first reported in Egyptian manuscript about 3000 years ago. In 1936 the distinction between type-1 and type-2 DM was clearly made. Type-2 DM was first described as a component of metabolic syndrome in 1988. Type-2 DM is the most common form of DM characterized by hyperglycemia insulin resistance and relative insulin deficiency. DMT2 results from interaction between genetic environmental and behavioral risk factor. It is estimated that 366 million people had DM in 2011 by 2030 this would have risen to 552 million the number of people with DMT2 is increasing in every country with 80% of people with DM living in low- and middle-income countries DM caused 4.6 million people would have DMT2 by the year 2030. Literature search has shown that there are few data available on the prevalence of DMT2 in Africa as a whole. The majority of the DM burden in Africa appears to be DMT2, with less than 10% of DM cases being DMT2. In 2011 center for disease control and prevention report estimates that DM affects about 25.8 million people in the US in 2010 with 90 to 95% of them being DMT2. As a result of this trend, it is fast becoming an epidemic in some countries of the world with the number of people affected expected to double in the next decade due to increase in ageing population thereby adding to the already existing burden for healthcare providers, especially in poorly developed countries. This review is based on a search of midline, the Cochrane database of systemic reviews, and citation lists of relevant publication. Type 2 diabetes occur mostly in people aged over 40 years. However, an increasing number of younger people, even children, are being diagnosed with type 2 diabetes. The first-line treatment is diet, weight control and physical activity. If the blood sugar (glucose) level remains high despite these measures then tablets to reduce the blood glucose level are usually advised. Insulin injection is needed in some cases. Other treatment includes reducing blood pressure if it is high, lowering high cholesterol levels and also using other measure to reduce the risks of complications. Type 2 diabetes tends to develop gradually (over weeks or months). This is because in type 2 diabetes you still make insulin (unlike in type 1 diabetes). However, you develop diabetes because

- 1) You do not make enough insulin for your body's needs;
- 2) The cell in your body do not use insulin properly. This is called insulin resistance. The cell in your body become resistant to normal levels of insulin. This means that you need more insulin than you normally make to keep the blood sugar (glucose) level down.

SIGNS AND SYMPTOMS

Signs and symptoms of type 2 diabetes often develop slowly. In fact, you can have type 2 diabetes for years and not know it. Look for:

- Increased thirst, Frequent urination, Increased hunger, Unintended weight loss, Fatigue, Blurred vision, Slow-healing sores, Frequent infections, Areas of darkened skin, usually in the armpits and neck.

HOW INSULIN WORKS

Insulin is a hormone that comes from the gland situated behind and below the stomach (pancreas).

- The pancreas secretes insulin into the bloodstream.
- The insulin circulates, enabling sugar to enter your cells.
- Insulin lowers the amount of sugar in your bloodstream.
- As your blood sugar level drops, so does the secretion of insulin from your pancreas.

THE ROLE OF GLUCOSE

- Glucose comes from two major sources: food and your liver.
- Sugar is absorbed into the bloodstream, where it enters cells with the help of insulin.
- Your liver stores and makes glucose.
- When your glucose levels are low, such as when you haven't eaten in a while, the liver breaks down stored glycogen into glucose to keep your glucose level within a normal range.

RISK FACTORS

Factors that may increase your risk of type 2 diabetes include:

- **Weight, Fat distribution, Inactivity, Family history, Race, Age, Prediabetes, Gestational diabetes, polycystic ovarian syndrome.**

COMPLICATIONS.

Although long-term complications of diabetes develop gradually, they can eventually be disabling or even life-threatening. Some of the potential complications of diabetes include:

- **Heart and blood vessel disease, Nerve damage (neuropathy), Kidney damage, Eye damage, Diabetes increase sleep, Slow healing, Hearing impairment, Skin conditions, Sleep apnea, Alzheimer's disease.**

HAHNEMANN AND CONSTITUTION-

Dr Hahnemann gives as a fair idea on the importance of the constitution in aphorism 5 of the organon of medicine, wherein he states “useful to the physician in assisting him to cure are the particulars of the most probable exciting cause of the acute diseases, as also the most significant points in the whole history of the chronic disease, to enable him to discover its fundamental cause, which is generally due to chronic Miasm. In these investigations, the ascertainable **physical constitution** of the patients (and intellectual character, his occupation, mode of living and habits, his social and domestic relations, his age, sexual function etc., are to be taken into consideration. Thereafter, at least at 20 places he mentions about the constitution in different context. He mainly refers constitution to the inherent nature of the individual. Hahnemann used the word Beschaffenheit in German, which usually translated as constitution in relationship to the Latin root “constitution” in homoeopathic works. Chamber Dictionary defines constitution as the natural condition of the body or mind; disposition.

HOMOEOPATHY AND DIABETES

Diabetes is a disease, the origin and the cause of which has little known and hidden in obscurity, has naturally taxed the energies of medical profession in all ages. Hence there is a vast array or various medicines which have been prescribed for this complaint. Historically diabetes been treated with great number of specifics proposed for its treatment and it is not surprising. The reason for this being the irremediable character of the disease²⁵.

CONSTITUTION AND DIABETES

Constitutional approach means where the mind, physical make up, general behavior, along with particulars of the disease will be considered in the totality. There is a long running debate about the consideration of mind for prescribing by homoeopaths. And one more important thing is which aspect is to be given importance or the whole, for this master Hahnemann has explained in his organon of medicine in aphorism number 211 which reads, “This holds good to such an extent, that the state of the disposition of the patient chiefly determines the selection of the homoeopathic remedy²⁷”.

Remedy which covers the mental state and the general symptoms of the patient has a greater possibility of curing than the one that covers the particulars²⁷.

Diabetes is a constitutional disorder and it is an off shoot of constitutional defects (genetic factors and altered immunity) having an impact on the entire constitution of an individual. Hence it calls for an in-depth constitutional approach for its cure. Homoeopathy is based on the principles that disease is a total application of body. Moreover, homoeopathy recognizes importance of underlying causes such as genetic and inherited factors as the root of any ailment of the body. Homoeopathic constitutional medicine prescribed in such conditions covers those criteria and so it is very crucial in management of deep rooted diseases²⁵. Concept of disease in homoeopathy is that disease is a total affection of mind and body, the disturbance of the whole organism. Individual organs are not the cause of the illness but the disturbance at internal level (i.e., life-force or vital energy). Therefore, homoeopathy does not believe in giving different medicines for different afflicted parts of body but rather give a constitutional remedy which will cover the disturbance of the whole person.

H A ROBERTS OPINIONS ABOUT DIABETES

The view point of the modern psychologist reflects the theory that the vast majority of human illnesses are traceable to dysfunctions of the glandular system. He saw that the function of some of the ductless glands is to secrete a minute quantity

of the specialized product in the system a secretion that has a vital bearing on the health of the whole constitutions. In many cases this secretion of a normal gland is so minute that it approaches the homoeopathic attenuation. Like homoeopathic remedies these glands also helps in maintaining the health with infinitesimal amounts of the secretions, we can hardly fail to see the important relationship this homoeopathic remedy may hold to the manifestations of the endocrine dysfunction and to the balance of the ductless glands. His observation about insulin that once insulin is given patient tends to depend on it and there is little hope of establishing normal balance.

H A ROBERTS SPEAKS ABOUT CONSTITUTIONAL APPROACH FOR DIABETES

We find many suitable remedies for sugar in urine in the repertories and most of the remedies listed are deep acting and have their respective emotional states. Diabetic patient presents with the subjective symptoms which will guide us to the remedy or he may give a history of emotional shock preceding the present affliction that will lead to you a remedy. The symptoms are clearly marked such that the constitution cannot be overlooked, sometimes it is indicating a constitutional remedy which has not proved to produce sugar imbalance. If the patient improves, we are justified by adding this as a clinical note to the existing. With this medicine if the general health is raised even though the lower sugar threshold remains the same not to be worried because we may safely rely on the remedy which maintains general improvement and not to be too anxious over the sugar output.

RICHARD HUGES ON DIABETES

It must always be of high importance, but it is not in the nature of the case and by the confession of its advocates, curative. Sometimes indeed under its use nature relieved of much other burden, asserts her recuperative power and when the pristine consequences. But too often the diabetic regimen proves but a continuous and most irk some palliative that the least abatement of its rigid restrictions is followed by an increase in the malady and the patient at length succumbs under pulmonary disease, carbuncle, or simple exhaustion of the power of the life. Until we can do more than cut off the supplies, until we can attack the morbid process if we cannot consider ourselves in a position to cure diabetes.

When we talk about disease like diabetes, we take in consideration terms of management rather than cure, this is because general management measures like dietary measures and daily exercise etc are mandatory, hence along with constitutional remedy general management has a vital role in the cure and management of diabetic patients which not only treats the patients superficially but also drives the symptoms away and heals the patient from within. Undoubtedly one can prove that homoeopathy is the medicine of future.

As diabetes is a disease which shows constitutional disturbance and it has great genetic predisposition and chances of heritable transmission so also this condition is a truly chronic in its form so this is a true chronic disease with miasms in its background. We cannot be specific about the Miasm of the diabetes as it can establish itself in all the three miasmatic states and so we can consider it as a multi miasmatic disease. The expression of diabetes in different miasmatic states is discussed below.

MIASMATIC BACKGROUND OF DIABETES

Predisposition to beta cell destruction is the main causative factor in primary Idiopathic diabetes mellitus. The presence of this predisposition corroborates with the basic conception in homeopathy about the nature and origin of all Chronic diseases. We must keep in mind Dr. Kent's 7th observation in this context. He arrived at the observation by treating several such incurable patients. Homoeopathically, Non-insulin dependent Diabetes Mellitus is either due to Psora or Sycosis or both. Psora leads to functional deficiency, Sycosis leads to incoordination and a combination of the two leads to simultaneous presence of both the conditions. These cases do not generally require exogenous insulin but if persist for a long time, being maltreated or non-treated, cellular destruction may finally

take place and non-Insulin dependent cases may turn to be Insulin dependent. Until then, the prognosis of these cases is better and the patients may be cured as the condition is reversible. But the medicinal treatment must be supplemented by proper dietetic management and physical exercise to reduce obesity. Diet control and adequate physical exercise alone may help to control the progress of these conditions. If obesity is reduced, Insulin receptor becomes much more effective and the Insulin resistant state steadily improves resulting in normalcy of blood sugar level. But unless the predisposition is corrected by anti-miasmatic constitutional treatment the patient will not be cured and slightest error in diet and regimen will lead to a relapse of the condition¹⁶. Diabetes mellitus comprises the pseudopsoric miasm. The pseudopsoric miasm is also known as Tubercular miasm. It is a combination of both Psora and Syphilitic miasm. Tubercular miasm is usually characterized by problem child i.e., slow in comprehension, dull, unable to keep a line of thought, unsocial, morose. He/she gets relief from offensive foot or axillary sweat which when suppressed often induces lung troubles or some other severe disease. The patient's mental symptoms tend to be ameliorated by an outbreak of an ulcer. The slightest bruise suppurates; the strong tendency is to the formation of pustules. As a general rule, the patient is very intelligent, keen observer and a programmatic planner who wants his life always busy but possesses a sedentary lifestyle.

INDICATION OF MIASM

As the miasm progress and predominates, weight loss, depreciation and destruction are the first indication of this miasm. Other indications are cosmopolitan habits, mentally keen but physically weak. Symptoms are ever changing. Rapid response to any stimuli (e.g. any slightest change of weather or atmosphere).

Emaciation instead of taking proper diet and drink, tendency to cough and cold easily, desire and craving unnatural things to eat, with desires and cravings for narcotics such as tea, Coffee, **tobacco** and any other stimulants have often their origin

in psoric or tubercular miasm. They sometimes have constant hunger and eat beyond their capacity to digest or they have no appetite in the morning but hunger for other meals.

THERAPEUTIC APPROACH TO DIABETES MELLITUS

There are many different modes of intervention in case of diabetes mellitus through homoeopathy. Physicians do use majorly three modes they are

Drugs in tincture form- Mother tinctures

Drugs involving the sectors(dilutions) - Acute remedies

Drugs covering the constitution

MOTHER TINCTURES AND THEIR INDICATIONS

ABROMA AGUSTA

Great uneasiness feeling of extreme prostration Loss of flesh with rapid emaciation

Burning sensation all over the body with thirst for large quantities of water.

CEPHALANDRA INDICA

The grand medicine for diabetes mellitus and insipidus Glycosuria with intolerable burning sensation all over the body.

Especially adapted to people oversensitive to noise and external environment. Dryness of mouth with thirst for large quantity of water at a time.

CHIONANTHUS VIRGINICA

Diabetes mellitus with high specific gravity, Frequent micturition with bile and sugar in urine. Pancreatic disease and other and glandular disorder.

GLYCERINUM

Profuse and frequent micturition and increased specific gravity and sugar It is long deep acting remedy building up tissues and so it is of great use in marasmus, mental and physical debility, diabetes etc. It seems to improve the general state of nutrition in its secondary action.

GYMNEMA SYLVESTRA

It is almost specific for diabetes mellitus

Decreases sugar in urine, patient puts on flesh and weight, appetite improves. Mental physical sexual spheres improves predominantly Profuse urination with large quantities sugar and feels weak after passing it.

HELONIAS DIOICA

Diabetes 1st stage urine profuse clear saccharine Lips dry stick together with great thirst restlessness emaciation. Mentally irritable and melancholic

Albuminuria acute or chronic during pregnancy with drowsiness unusually tired. Sensation of weakness dragging and weight in the sacrum and pelvis with great languor prostration are excellent indications.

ACID PHOSPHORICUM

Young people who grow rapidly and who are overtaxed mentally and physically. Debility from loss of vital fluids

Bad effects from grief anguish care or disappointed love

Frequent and profuse urination forcing the patient to rise often in the night

RHUS ARBORESCENS

Diabetes with large quantities of low specific gravity urine. Pale albuminous urine

Severe pain before or at the beginning of the micturition causing great agony in children.

SYZYGIUM JAMBOLINUM

The most powerful remedy in diabetes mellitus Causes a marked diminution of sugar in the urine.

Polydipsia polyuria and profound prostration and emaciation. Especially suited to people who suffer with chronic dyspepsia.

HOMOEOPATHIC DILUTIONS USED ON TOTALITY

ACETIC ACID:

Adapted to pale lean persons with lax, flabby muscles; face pale waxy. Diabetes with intense, burning, insatiable thirst

Violent burning pains in the stomach and chest, followed by coldness of skin

and cold sweat on the forehead.

ARGENTUM METALLICUM:

Diuresis urine profuse, turbid with a sweet odor. Frequent micturition. polyuria Emaciation and great weakness. Tall, thin, irritable persons. Ailments from abuse of mercury. Constitutional effects of onanism.

COCCA:

Persons who are wearing out under mental and physical strain. Longing for alcoholic liquors and tobacco. Incarcerated flatus; raises with noise and violence, as if it would split the esophagus. No appetite but for sweets.

Diabetes with impotency.

CUPRUM ARSENICOSUM:

Renal inefficiency and uremia, garlicky odour.

Diabetes urine with a high specific gravity; increased acetones and diabetacid. Cramp in the calves. Worse after midnight, only relieved by getting out of bed and standing. Ulcers gangrene.

Boils on the scrotum, Purulent white discharge from the urethra [gleet]tingling and burning in the urethra pain in the prostrate and penis.

INSULINUM:

Restores the lost ability of oxidizing carbohydrate and storing glycogen in the liver. In a persistent case of skin irritation, boils or varicose ulceration with polyuria.

KALI BROMATUM:

Adapted to large persons inclined to obesity. Nervous restless cannot sit still must move about or keep occupied; hands and fingers in constant motion.

LACTICUM ACIDUM:

Excessive thirst frequent and copious micturition; urine contains sugar. Skin rough and dry; obstinate constipation; tongue dry sticky gastric ailments. Debility and emaciation exertion.

LYCOPUS VIRGINICUS:

Diabetes mellitus and insipidus from some derangement of the central nervous system or sympatheticus. Copious flow of clear urine of great density, containing sugar, intense thirst; great emaciation.

NATRICUM SULPHURICUM:

Dryness of mouth and throat; great thirst for very cold drinks; Voracious appetite with boring pain; disgust while eating. Increased urination especially at night, pains in small of back with burning urine. Worse in rainy weather, from water in any form.

Always feels better in warm dry air.

PICRICUM ACIDUM:

Emission profuse followed by great exhaustion.

Priapism, satyriasis. Brainfag; of literary or business people; slightest excitement, mental exertion or overwork brings on head ache.

PLUMBUM METALLICUM:

Constipation stools hard lumpy black like sheep dung.

Excessive and rapid emaciation general or partial paralysis; extreme, with anemia and great weakness.

SULPHURICUM ACIDUM:

Chilblains with gangrenous tendency. Carbuncles boils and other staphylococcal and streptococcal infection

Heartburn, sour eructations, craving for alcohol.

URANIUM NITRICUM:

Excessive thirst nausea vomiting ravenous appetite eating followed by flatulence abdomen bloated.

Complete impotency with nocturnal emissions. Organs cold, relaxed sweaty.

Diuresis, incontinence of urine. Burning in urethra with very acid urine. Unable to retain urine without pain.

Great emaciation, debility and tendency to ascites with general dropsy.

MATERIALS AND METHODS (METHODOLOGY)

The cases will be collected from following sources-

- O.P. Ds of Naiminath Homoeopathic Medical College, Hospital and research centre, Agra.
- I.P. Ds of Naiminath Homoeopathic Medical College, Hospital, and research centre, Agra.
- Peripheral OPDs of Naiminath Homoeopathic Medical College, Hospital, and research centre, Agra
- Rural Health Camps conducted by Naiminath Homoeopathic Medical College, Hospital, and research, Agra

Study duration

18 months duration

Selection of sample

30 cases.

INCLUSION CRITERIA: -

- Patients in age group 35 years to 60 years.
- Both genders.
- Patients suffering from subjective symptoms of Diabetes Mellitus.

EXCLUSION CRITERIA: -

- Patient having blood glucose level above 400mg/dl.
- Patients do not give consent to withdraw the conventional treatment, he has been taken.

Study design

- The research design is prospective, non-controlled experimental design.

Selection of tools**Data collection**

Data collection will be done by interviewing the patients during first and subsequent follow-up.

Does the study require any investigation or intervention to be Conducted on patients or other humans or animals?

If so, please Describe briefly.

Yes, appropriate investigation or intervention will be conducted on patient.

Basis of Selection of Drug:

Individualistic / constitutional / Anti-miasmatic were given to them according to the present totality of symptoms.

Auxiliary Line of Treatment:

Counselling for recording stress, anxiety and other host related factors favoring the disease, Diet correction if necessary & life-style modification.

Criteria of Improvement:

The results were calibrated into the following categories:

MARKED IMPROVEMENT: General improvement at all levels. A feeling of well-being of the patient mentally and physically. Improvement in symptoms and signs.

MODERATE IMPROVEMENT: Moderate symptomatic improvement of the patient. General improvement only at certain levels.

NO IMPROVEMENT: No improvement at any level. No improvement in any sign and symptoms, but treatment still going on.

MASTER CHART

Sr.	REG.	DATE	NAME	AGE	SEX	RELIGION	PRESCRIBED	FASTI
No.	No.						REMEDY	BEFORE T/T
1	13464	29/08/2018	Alka Srivastav	46	F	Hindu	Ignatia Amara	15
2	87895	03/09/2018	Aarti Gupta	38	F	Hindu	Sulphur	21
3	45017	11/08/2018	Satish Chand Sharma	65	M	Hindu	Phosphorus	18
4	45998	05/09/2018	Munna	51	M	Hindu	Lycopodium	14
5	46334	09/09/2018	Ram Kishan	64	M	Hindu	Phosphoric Acid	23
6	45885	11/09/2018	Mhod Akram	43	M	Muslim	Sulphur	25
7	38762	13/09/2018	Shajahan Begum	48	F	Muslim	Natrum Mur	20
8	47314	19/09/2018	Dhan Singh	45	M	Hindu	Nux Vomica	18
9	48178	25/09/2018	Amar Singh	42	M	Hindu	Staphisagria	20
10	50033	03/10/2018	Hari Shankar Sharma	62	M	Hindu	Nitric Acid	17
11	59401	05/10/2018	Rakesh Gupta	52	M	Hindu	Natrum Mur	25

12	64086	06/10/2018	Tahira	42	F	Muslim	Sulphur	20
13	49097	08/10/2018	Ashok Kumar	67	M	Hindu	Phosphoric Acid	19
14	53221	15/10/2018	Boby Sharma	43	F	Hindu	Ignitia Amara	24
15	58551	21/10/2018	Wahid Akhtar	42	M	Muslim	Staphisagria	15
16	49329	06/08/2018	Rehan Ahmed	50	M	Muslim	Arsenic Alb	25
17	45330	26/07/2018	Bittan Devi	46	F	Hindu	Phosphorus	17
18	61242	05/08/2018	Suresh Chand	39	M	Hindu	Nitric Acid	24
19	62530	12/08/2018	Rambabu	65	M	Hindu	Lycopodium	22
20	49097	20/08/2018	Ashok Jain	43	M	Hindu	Nux Vomica	16
21	42989	05/10/2018	Mahima Devi	60	F	Hindu	Pulsatilla	12
22	43641	16/09/2018	Rajkumari	41	F	Hindu	Phosphoric Acid	18
23	180841	05/09/2018	Rishab Sharma	41	M	Hindu	Fluoric Acid	14
24	48418	08/09/2018	Vijay Kumar	55	M	Hindu	Lycopodium	15
25	51151	14/06/2018	Sabbir Ahemd	39	M	Muslim	Sulphur	22
26	39605	12/07/2018	Shalini Devi	42	F	Hindu	Sepia	17
27	11453	14/09/2018	Vinod Singh	55	M	Hindu	Thuja	12
28	51058	04/10/2018	Bani Singh	47	M	Hindu	Ignatia amara	19
29	48049	10/10/2018	Kamla Devi	48	F	Hindu	Phosphoric Acid	17
30	46104	16/10/2018	Dharmendra Singh	51	M	Hindu	Sulphur	19

OBSERVATIONS & RESULTS

Age Distribution 30 patients belonging to the age group 35- 60 were selected for study. Among the 30 patients maximum prevalence of Diabetes Mellitus was noted between 41-50 years of age (50%). The second highest prevalence was found in age group 51-60 (40%) and next age group 30-40 yrs (10%). The distribution is presented in table below, also the diagrammatic representation is furnished.

Age	30-40	41-50	51-60
Patient	3	15	12
Percentage	10%	50%	40%

Representation of patients according to Domicile

Domicile	Cases	Percentage
Rural	12	40%
Urban	18	60%

Representation of patients according to gender

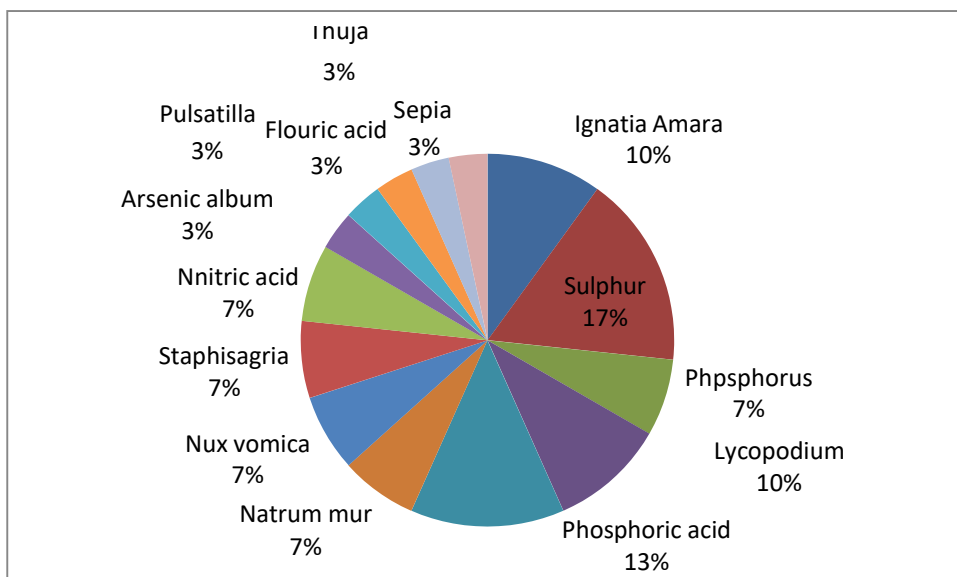
Gender	Cases	Percentage
Male	20	67%
Female	10	33%

Representation of patients according to family History

Family history	Cases	Percentage
Present	22	73%
Absent	8	27%

Observation of Remedies Used

Remedies	Cases	Percentage
Ignatia Amara	3	10%
Sulphur	5	17%
Phosphorus	2	7%
Lycopodium	3	10%
Phosphoric acid	4	13%
Natrum mur	2	7%
Nux vomica	2	7%
Staphysagria	2	7%
Nitric acid	2	7%
Arsenic album	1	3%
Pulsatilla	1	3%
Fluoric acid	1	3%
Sepia	1	3%
Thuja	1	3%



Fasting Blood Sugar Value Before and after Treatment

Before treatment	After treatment
150	90
210	140
180	110
140	200
230	100
250	180
200	80
180	90
200	80
170	230
255	140
190	230
246	154
150	150
250	175
175	100
240	135
220	240
160	86
120	200
182	126
142	110
156	100
225	255
170	100
127	150
190	240
175	94

Observation of Symptomalogical Presentation of Diabetes Mellitus Cases
Changes in presenting Clinical Features after treatment

Symptom	Cases	>	%	<	%	N	%	D	%
Increased thirst	20	12	60%	2	10%	4	20%	2	10%
Increased hunger	16	10	63%	3	19%	2	13%	1	6%
Loss of weight	5	3	60%	0	0%	2	40%	0	0%
Weakness	24	14	58%	4	17%	3	13%	3	13%
Blurred vision	5	2	40%	1	20%	1	20%	1	20%
Increased Urinary	11	5	45%	3	27%	3	27%	0	0%
Urgency									
Recurrent infections of the skin	10	6	60%	2	20%	1	10%	1	10%
Frequent urinary tract infections	14	10	71%	0	0%	2	14%	2	14%
Burning Sensation	20	14	70%	1	5%	3	15%	2	10%
Dryness of mouth	8	6	75%	0	0%	0	0%	2	25%
Numbness in the legs, feet or fingers	15	10	67%	1	7%	4	27%	0	0%

Case-No Patients
<-Aggravation

N-No change
>-amelioration

D-Disappearance

Distribution of Presenting Complaint

Presenting complaints	Number	Percentage
Increased thirst	20	67%
Increased hunger	16	53%
Loss of weight	5	17%
Weakness	24	80%
Blurred vision	5	17%
Increased Urinary urgency	11	37%
Recurrent infections of The Skin	10	33%
Frequent urinary tract infections	14	47%
Burning Sensation	20	67%
Dryness of mouth	13	43%
Numbness in the legs, feet or fingers	15	50%

SUMMARY

This study was done on patient suffering from Diabetes Mellitus type 2. The objective of study was

- To understand the role of constitutional remedies in treatment of DM Type 2
- To understand the which potency is more effective in treatment of DM Type 2.
- To prevent the complication and recurrence and provide the cure in rapid and gentle way.

To educate the people by the cause and aware about the Homoeopathic treatment of DMT2

In the study of 30 cases there are 21 cases improved 8 cases are worse and 1 case has no change from the homoeopathic medicine which are selected by taking appropriate rubric from homoeopathic medical Organon of Medicine, this modern Organon of Medicine arranged in alphabetical and more Nosological terminology in the form of rubric which are helpful to select the repertorization. Most of rubric related to diabetic mellitus type 2 arranged in clinical chapter. Miasmatic evaluation of all the cases revealed sycosis to have maximum predominance as fundamental miasm in 20 (66.67%) cases. And psora, sycosis, tubercular miasms share equal predominance as dominant miasms in 9 (30%) cases each.

Constitutional medicines were given to all the patients and along with that general management guidelines in the form of diet charts and exercise guidelines were also explained. Follow up analysis of the patient's state and regularity of general management guidelines followed were assessed, patients who followed general management regularly along with constitutional treatment were 14 cases out of which 12 cases showed marked improvement in their health status when compared to the other group with occasional and irregular general management habits. Hence, we can conclude that homoeopathic treatment with dietary and exercise guidelines when strictly implemented is the best method of approaching type 2 DM.

RESULT OUTCOME-

1. There is a significance difference in the prevalence of DMT2 male 20(66.67%) and female 10(33.33%)
 2. APD, osteoarthritis and hypertension are the most common associated complaints observed along with DM in this study.
 3. According to the miasmatic evaluation of the 30 cases taken for the study I found that Sycosis is presenting maximum predominance as fundamental Miasm in 20 (66.67%) cases. And Psora, Sycosis, tubercular Miasm share equal predominance as dominant Miasm in 9(30%) cases each reported for the study. Pathological survey of the disease also reveals sycotic – tubercular
 4. predominance
 5. Along with the constitutional treatment general management in the form of diet chart and exercise guidelines were given to the patient and their effective application is also assessed on subsequent follow-ups.
 6. According to the need of the cases some acute remedies were prescribed in between and also antimiasmatic remedies.
- Evaluation of the symptoms before and after the treatment reveals that there is significant improvement in all the symptoms considered before and after treatment. Symptoms like hyperglycemia which was seen in almost all 30 (100%) cases, but after treatment only 10 (33.33%) cases only showed hyperglycemia that too with less intensity. And also noticed in the symptom weakness which is expressed by 23(76.67%) cases before treatment is minimized to 4 (13.33%) cases after treatment.
7. All the cases were worked out and the constitutional similimum was selected and patients were observed on follow ups initially spaced at a gap of 2 weeks and later 1 month duration.
 8. Along with the constitutional treatment general management in the form of diet charts and exercise guidelines were given to the patient and their effective application is also assessed on subsequent follow-ups.
 9. Potency selection was done based on the standardized guidelines in the SCR according to the susceptibility and sensitivity of the patient.
 10. Few cases allopathic medication was gradually tapered and many were strictly on homoeopathic treatment alone.
 11. According to the need of the cases some acute remedies were prescribed in between and also antimiasmatic remedies.
 12. Diabetes according to the modern perspective is a disease of multicentric origin, with multi-dimensional presentation and so the most accurate approach is the holistic approach, where simple reduction of the blood glucose levels is not the motive instead it induces disease managing efficacy of the individual which is understood by the general well-being of the patient irrespective of the plasma glucose concentration.

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